

State of North Carolina
Department of Environment,
Health and Natural Resources
Winston-Salem Regional Office

James B. Hunt, Jr., Governor
Jonathan B. Howes, Secretary



DIVISION OF ENVIRONMENTAL
MANAGEMENT
GROUNDWATER SECTION

February 23, 1996

CERTIFIED MAIL NUMBER: P-536 317 008
RETURN RECEIPT REQUESTED

NC-Division of Forest Resources
P.O. Box 27687
Raleigh, NC 27611

SUBJECT: Underground Storage Tank (UST) Closure Assessment at N.C. Forest
Resources, Route 16, Box 272 (Hargrave Road), Lexington, Davidson County,
Incident Number Unassigned

Dear Sir or Madam:

The Groundwater Section of the Winston-Salem Regional Office is now reviewing the UST closure assessment for the subject location. In order to determine whether or not the closure was performed in accordance with State and Federal regulations, the Groundwater Section must be provided with the following information *30 days from receipt of this letter*:

- o unless the tank excavation extended to all areas of the dispenser locations, samples are needed under associated dispensers -- one sample beneath each coupling joint location (swing joint, flexible connector) and one additional sample for every ten feet of island; and,
- o refer to the enclosed chart(s) for analyses that are required to be run and were not for the original closure report, please resample as needed.

Your cooperation is appreciated. Providing the requested information by the deadline specified in this letter will prevent a Notice of Violation being issued to you for the failure to provide an adequate closure report.

All soil sample analyses must be accompanied by a chain-of-custody and the sampling protocol. *Please note that all subsurface investigative work is now required to be supervised by a Licensed Geologist or Professional Engineer, with all reports signed and sealed by that professional.* Please refer to the file name, **N.C. Forest Resources**, on the cover letter of your reply. This will help us speed up the review. If you have any questions, please contact me at the letterhead address and/or telephone number.

Sincerely,

*Thomas Moore*Thomas Moore
Hydrogeological Technician

cc: Regional Office Files

P-536 317 008

REGISTERED MAIL
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

152-607

Sent to

Street and No.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

NC DIVISION OF FOREST
RESOURCES
P O BOX 27687
RALEIGH NC 27611

4a. Article Number

P 536 317 008

4b. Service Type

- | | |
|---------------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Addressee or Agent)

X

NELSON AVERY

FEB 27 1996

Thank you for using Return Receipt Service.